

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Association of Realtors Political Action Committee			FEC IDENTIFICATION NUMBER ▼ C C00030718		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on / /					
Full Name of Payee Bridge Impact LLC			Date of Public Distribution/Dissemination / / 05 / 13 / 2026		
Mailing Address 5623 Southwick St			Amount 3460.00		
City Bethesda	State MD	Zip Code 20817-3509	Transaction ID : E3C64B1CC7B2049FE9FC Date of Disbursement or Obligation / /		
Purpose of Expenditure Digital Ad buys, Meta & GIFs		Category/ Type			
Name of Federal Candidate Menendez, Rob, , Rep.,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: NJ		
Calendar Year-To-Date Per Election for Office Sought 11260.00			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
Full Name of Payee AMBROSINO MUIR HANSEN CROUNSE			Date of Public Distribution/Dissemination / / 05 / 13 / 2026		
Mailing Address 6309 Wiscasset Rd			Amount 7200.00		
City Bethesda	State MD	Zip Code 20816-2111	Transaction ID : EA6ACD3080C5845FF828 Date of Disbursement or Obligation / /		
Purpose of Expenditure Digital Ad buys, Meta & GIFs		Category/ Type			
Name of Federal Candidate Menendez, Rob, , Rep.,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: NJ		
Calendar Year-To-Date Per Election for Office Sought 11260.00			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			10660.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Sanford, Craig, W, Mr.,			Date / / 05 / 14 / 2026		

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NAME OF COMMITTEE (In Full) National Association of Realtors Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00030718
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 13 / 2026
Mailing Address 430 N Michigan Ave		Amount 600.00
City Chicago	State IL	Zip Code 60611-4011
Purpose of Expenditure Administrative Consulting	Category/ Type	Transaction ID : EF44AF856869A40C1937 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Menendez, Rob, , Rep.,		Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 13 / 2026
Mailing Address 430 N Michigan Ave		Amount 1200.00
City Chicago	State IL	Zip Code 60611-4011
Purpose of Expenditure Administrative Consulting	Category/ Type	Transaction ID : E79E623D9BEAE49B1AA Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Sherman, Brad, , Rep.,		Office Sought: ☒ House District: 32 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1800.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sanford, Craig, W, Mr.,

Signature

Date

MM / DD / YYYY
05 / 14 / 2026

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Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee AMBROSINO MUIR HANSEN CROUNSE			Date of Public Distribution/Dissemination 05 / 13 / 2026		
Mailing Address 6309 Wiscasset Rd			Amount 7200.00		
City Bethesda		State MD	Zip Code 20816-2111		Transaction ID : E2CE593AAE98640908CC
Purpose of Expenditure Digital Ad buys, Meta & GIFs		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Sherman, Brad, , Rep.,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 32 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			34078.00 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee Bridge Impact LLC			Date of Public Distribution/Dissemination 05 / 13 / 2026		
Mailing Address 5623 Southwick St			Amount 7908.00		
City Bethesda		State MD	Zip Code 20817-3509		Transaction ID : E4C59F448E97D457BB52
Purpose of Expenditure Digital Ad buys, Meta & GIFs		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Sherman, Brad, , Rep.,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 32 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			34078.00 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			15108.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Sanford, Craig, W, Mr.,			Date 05 / 14 / 2026		

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Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on / /					
Full Name of Payee Meath Media Group			Date of Public Distribution/Dissemination / /		
Mailing Address 4441 Kingle St NW			Amount 17770.00		
City Washington		State DC	Zip Code 20016-3578		Transaction ID : E713F8C740DE440799F7
Purpose of Expenditure Online video production costs		Category/ Type		Date of Disbursement or Obligation / /	
Name of Federal Candidate Sherman, Brad, , Rep.,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 32 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 34078.00			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____		
Full Name of Payee			Date of Public Distribution/Dissemination / /		
Mailing Address			Amount 		
City		State	Zip Code		Date of Disbursement or Obligation / /
Purpose of Expenditure		Category/ Type		Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____	
Name of Federal Candidate			☐ Support ☐ Oppose		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought					
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 17770.00 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 45338.00					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Signature Sanford, Craig, W, Mr., Date / / 05 / 14 / 2026					